

Kimothy Neese

Name

48

District

Republican

Party Affiliation

HOUSE OF REPRESENTATIVES OF THE STATE OF INDIANA

STATE HOUSE
INDIANAPOLIS, INDIANA 46204STATEMENT OF ECONOMIC INTERESTS
FOR THE CALENDAR YEAR 2005

This statement shall be filed by members not later than seven days following the first session day in January of each year and covers only activity occurring in the preceding calendar year. Non-incumbent candidates for the General Assembly must file this statement before filing a declaration of candidacy. All statements shall be filed with the Principal Clerk of the House, Room 3A-8, 3rd Floor State House, Indianapolis.

Additional pages may be inserted, if necessary, See IC 2-2.1-3, for any clarification of the questions.

Incumbent legislator (x) X

Legislative candidate (x) _____

1. List the name of your employer(s) and the employer(s) of your spouse and the nature of the employer's business. "Employer" means any person or entity from whom the member of or candidate for the Indiana General Assembly or his spouse received more than 33% of his non-legislative income.

NAME OF EMPLOYER	NATURE OF BUSINESS	Your Employer (x)	Spouse's Employer (x)
Solid Waste Management District of Elkhart Co.	Recycling	X	
Elkhart General Hospital	Emergency Room		X

2. List the name of every sole proprietorship or professional practice operated by you or your spouse and the nature of the business.

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)
N/A			

3. List the name of every partnership and limited liability company of which you or your spouse are a member and the nature of the business.

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)
N/A			

4. List the name of any corporation of which you or your spouse are an officer or director and the nature of the corporation's business. Churches need not be listed.

NAME OF BUSINESS	NATURE OF BUSINESS	Your Business (x)	Spouse's Business (x)
N/A			

5. List the name of any corporation in which you, your spouse or unemancipated child own stock or stock options having a fair market value in excess of \$10,000. No time or demand deposit in a financial institution or an insurance policy need be listed.

NAME OF BUSINESS	Your Stock (x)	Spouse's Stock (x)	Children's Stock (x)
N/A			

6. List the name of any state agency or the supreme court of Indiana which licenses or regulates any of the following: (a) your profession or occupation, (b) your spouse's profession or occupation or (c) any proprietorship, partnership, corporation or limited liability company listed under items 2, 3, or 4. Also list the nature of the licensure or regulation. The requirement to file certain parts with the secretary of state or to register with the department of revenue as a retail merchant, manufacturer or wholesaler shall not be considered as licensure or regulation.

NAME OF STATE AGENCY	NATURE OF LICENSURE	Profession or Occupation (x)		Business listed under No. 2, 3, 4 (x)	
		You	Spouse	You	Spouse
INDIANA Nursing Board	R.N. Lic.		L		

7. List the name of any person whom you know to have been a lobbyist in the previous calendar year and whom you know to have purchased the following: (a) from you, your sole proprietorship or family business, goods or services for which the lobbyist paid in excess of \$100 or (b) from you partner, goods or services for which the lobbyist paid in excess of \$1,000. This subdivision does not apply to purchases made after December 31, 1998, by a lobbyist from a legislator's retail business made in the ordinary course of business at prices that are available to the general public. For purposes of this subdivision, a legislator's business is considered a retail business if the business is a retail merchant as defined by IC 6-2.5-1-8. "Lobbyist" means any person, firm, corporation or association registered under IC 2-7-2. "Family business" means a corporation in which you and your spouse own at least 80% of the voting stock, regardless of whether all or a portion is owned jointly or severally.

NAME OF LOBBYIST	Purchased over \$100 from you or your business (x)	Purchased over \$1,000 from your partner (x)
N/A		

8. List the name of any person or entity from whom you received any of the following: (a) any gift of cash from a lobbyist, (b) any single gift other than cash having a fair market value in excess of \$100 or (c) any gifts other than cash having a fair market value in the aggregate in excess of \$250. Gifts from a spouse or close relative need not be listed unless the donor has a substantial economic interest in a legislative matter. Campaign contributions need not be listed.

NAME OF DONOR	Any gift of cash from a lobbyist (x)	Any single gift over \$100 (x)	Total gifts over \$250 (x)
Ind. State Museum Membership		X	
" Theaters Ass.		X	
Indp/s. Airport Authority		X	
South Bend Regional		X	

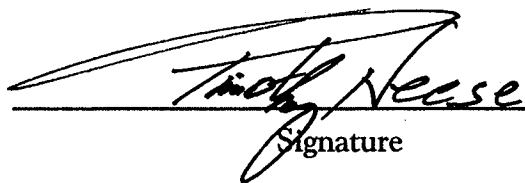
9. List the name of any lobbyist: (a) who is a member of a partnership or limited liability company of which you are a partner or member or employee or (b) who is an officer or director of a corporation of which you are an officer, director or employee or (c) who is a manager of a limited liability company of which you are a member or employee. Describe the legislative matters which are the object of the lobbyist's activity.

NAME OF LOBBYIST	LEGISLATIVE MATTERS WHICH ARE THE OBJECT OF THE LOBBYIST'S ACTIVITY	Your Connection
N/A		

10. List the name of any person or entity on whose behalf you have appeared before, contacted or transacted business with any state agency or official thereof. List also the name of the state agency, the nature of the appearance and the cause number, if any. This does not apply when the services are rendered without compensation. "State agency" does not include state-supported colleges or universities or the agencies of any municipality or political subdivision of the state.

NAME OF PERSON	NAME OF STATE AGENCY	Nature of Contact, Appearance, Etc.	Cause Number
N/A			

I certify that the foregoing information is true, accurate and complete, as I am verily informed and believe.


Signature

Filed with the Clerk of the Indiana House of Representatives this 4 day of January, 2006.

203 N. Ward St.
Address
Elkhart, IN. 46514
City

Dan Klappert, Deputy Clerk
Name, Title

574-293-3894
Area Code / Telephone

[Handwritten notes and signatures at the bottom right of the page]

ILRC Home Page**Back***Timothy Neese, Indiana House*

Indiana Lobby Registration Commission
 10 W Market St, Ste 1760
 Indianapolis, Indiana 46204
 Phone: (317) 232-9860
 Fax: (317) 233-0077

Confirmation number: 32353
Type of Statement : Original
Reporting Period : November 1 to April 30 2005
Terminate Registered Lobbyist Status : <input type="checkbox"/>
Reporting as : employer

REPORT OF LOBBYIST ACTIVITY

Questions? Read Indiana Code 2-7-3-1 through 2-7-3-5 or call the Commission office at (317) 232-9860.

Registered lobbyist are required by law either to file activity report twice year or to terminate their registrations. Lobbyists filing activity reports after the **deadlines of April 30, 2005, and October 31, 2005**, will be charged a late fee of \$10 per day, per report, not to exceed \$100 per report. Mailed reports are considered filed on the date of the canceled postmark.

NOTE: A lobbyist who both receives compensation for lobbying and who also compensates another person to lobby shall only file a separate activity report for each person whom he receives payment for lobbying.

Section A - Registrant Information		
1. Full Legal Name of Lobbyist: Indiana Energy Association, Inc	2. Preferred mailing address: business	
3. Complete residence address and phone number: <i>203 N. Ward St. Elkhart, IN. 46514 574-293-3894</i>	4. Complete business address and phone number: 1600 One American Square Box 82065 Indianapolis IN 46282 3176324406	
5. Full name, title and phone number of person completing this report: Kimberly M. Reed Secretary/Treasurer 3176324406		
6. List the persons responsible for the activities of the registrant:		
Name	Title	Address/Phone Number
Edwin J. Simcox	President	1600 One American Square Box 82065 Indianapolis IN 46282 3176324406
Kimberly M. Reed	Secretary/Treasurer	1600 One American Square Box 82065

		Indianapolis IN 46282 3176324406
Kerry L. Waite	Assistant Secretary/Treasurer	1600 One American Square Box 82065 Indianapolis IN 46282 3176324406
Stanley C. Pinegar	Executive Director	1600 One American Square Box 82065 Indianapolis IN 46282 3176324406
Section B - Employer/Client of the Registrant (only a compensated lobbyist completes this section)		
1. Name of client:		
2. Complete business address:		
3. Business phone number:		
4. Type of business:		
Section C - Lobbying Expenditures		
Pursuant to IC 2-7-3-1, a compensated lobbyist shall file a separate activity report relating to each person from whom he receives payment for lobbying. Employer lobbyists shall file one activity report. However, a lobbyist who both receives compensation for lobbying and also compensates another to lobby shall only file separate activity reports for each person from whom he receives payment for lobbying.		
	Value	
1. Total compensation paid to employees and contract lobbyists for performing lobbying services:	5,152.16	
2. Total reimbursement to others who perform lobbying services:	428.36	
3. Receptions:	0.00	
4. Entertainment, including meals:	4,051.67	
5. Gifts to employees of members of the general assembly or to the immediate family of employees of members of the general assembly:	199.00	
6. Expenditures made for the benefit of all members of the general assembly:	23,871.77	
7. Total expenditures and gifts reported in Sections E-2 and E-3 (and not reported elsewhere on this form):	8,669.67	
8. Registration and late fees:	400.00	
9. All other expenditures made for lobbying that have not been reported on other lines:	1,680.63	
10. Total lobbying expenditures (add lines 1 through 9):	44,453.26	
11. If reporting only as a compensated lobbyist, or as both a compensated and an employer lobbyist, you may subtract all of line 10, except for expenses incurred to lobby on your own behalf or expenses that were not attributed to any client:	0.00	
12. NET FIGURE (subtract line 11 from line 10):	44,453.26	
Section D - Affidavit of Non Legislative Income		
List the names of each member of the general assembly from whom the lobbyist has received an affidavit required under IC 2-2.1-3-3.5.		
Section E1 - Good-Faith Exchange Transactions		

Report purchases made by a lobbyist from a legislator's sole proprietorship, partnership, or family business (if purchase is in excess of \$100/day or \$500 aggregate for the year).

Name the legislator's business for each exchange	Identify the transaction	Value
Berkshire Florist (Behning)	Flower Purchases	1,645.12

Section E2 - Gifts

Report gifts given to members of the general assembly, officers of the general assembly, employees of the general assembly, or immediate family of members, officers, or employees of the general assembly (if gift is in excess of \$100/day or \$500 aggregate for the year).

Name the legislator's business for each exchange	Identify the transaction	Value
Sen. Tom Weatherwax	Sporting event ticket	108.00
Mrs. Kay Weatherwax	Sporting event ticket	108.00
Rep. Jack Lutz	Sporting event ticket	495.00
Sen. Luke Kenley	Sporting event ticket	495.00
Eddie Langford (Kenley staff)	Sporting event ticket	495.00
Rep. Greg Porter	Sporting event ticket	495.00

Section E3 - Other Expenditures Not Reported in Sections E-1 and E-2

Report any expenditure(s) not included in Sections E-1 and E-2 that exceeded \$100 in a day or \$500 aggregate for the year. This includes meals, entertainment, and receptions to which less than all members of the general assembly were invited.

Name the legislator's business for each exchange	Identify the transaction	Value
Rep. James Buck	sporting event tickets	600.00
Rep. William Crawford	sporting event ticket	105.00
Rep. Dave Crooks	sporting event ticket	105.00
Rep. Cleo Duncan	sporting event tickets	210.00
Sen. Beverly Gard	sporting event tickets	210.00
Sen. Brandt Hershman	national inaugural activity	250.00
Rep. Jack Lutz	sporting event ticket	105.00
Rep. Richard McClain	sporting event ticket	105.00
Sen. Robert Meeks	sporting event tickets, meals, golf fees	0.00
Sen. James Merritt	sporting event ticket	105.00
Rep. Tim Neese	sporting event ticket	495.00
Rep. Dan Stevenson	sporting event tickets, meal expenses	844.42
Sen. Tom Weatherwax	sporting event tickets, meals, national inaugural activities	0.00
Sen. Tom Wyss	sporting event tickets, meals, national inaugural activities	660.70

Section F - Lobbying Interests

Please identify the topics you anticipate will be associated with your lobbying efforts. Check all the appropriate boxes and write down additional topics and specific legislation:

- | | | |
|--|---|--|
| <input type="checkbox"/> Accounting | <input checked="" type="checkbox"/> Environment | <input type="checkbox"/> Pension Funds |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Finance | <input type="checkbox"/> Pharmaceuticals |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Fire Fighters | <input type="checkbox"/> Physical Fitness |
| <input type="checkbox"/> AIDS | <input type="checkbox"/> Gaming | <input type="checkbox"/> Prevention of Child Abuse |
| <input type="checkbox"/> Alcoholic Beverages | <input type="checkbox"/> Health Care | <input type="checkbox"/> Property Tax |
| <input type="checkbox"/> Arts | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Safety |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Homeless | <input type="checkbox"/> Railroad |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Hospitals | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Budget | <input type="checkbox"/> Housing | <input checked="" type="checkbox"/> Regulation |
| <input type="checkbox"/> Business | <input type="checkbox"/> Human Services | <input type="checkbox"/> Reproductive Rights |
| <input type="checkbox"/> Casino Gaming | <input type="checkbox"/> Industry | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Children's Issues | <input type="checkbox"/> Infrastructure | <input type="checkbox"/> Riverboat Gambling |
| <input type="checkbox"/> Civil Justice | <input type="checkbox"/> Insurance | <input type="checkbox"/> Safety |
| <input checked="" type="checkbox"/> Commerce | <input type="checkbox"/> Judiciary | <input type="checkbox"/> Salaries |
| <input type="checkbox"/> Community | <input type="checkbox"/> Labor | <input type="checkbox"/> State Government |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Law Enforcement | <input checked="" type="checkbox"/> Taxation |
| <input type="checkbox"/> Consumer | <input type="checkbox"/> Legislative Ethics | <input type="checkbox"/> Teachers |
| <input type="checkbox"/> County Government | <input type="checkbox"/> Licensure | <input type="checkbox"/> Telecommunications |
| <input type="checkbox"/> Courts | <input type="checkbox"/> Local Government | <input type="checkbox"/> Tobacco |
| <input type="checkbox"/> Crime Victim Assistance | <input type="checkbox"/> Managed Care | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Medicaid/Medicare | <input checked="" type="checkbox"/> Utilities |
| <input type="checkbox"/> Disabled | <input type="checkbox"/> Medical Records | <input type="checkbox"/> Wagering |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Waste Management |
| <input checked="" type="checkbox"/> Economic Development | <input type="checkbox"/> Motor Vehicles | <input type="checkbox"/> Welfare |
| <input type="checkbox"/> Education | <input type="checkbox"/> Municipalities | <input type="checkbox"/> Women's Issues |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Natural Resources | <input type="checkbox"/> Workers' Compensation |
| <input checked="" type="checkbox"/> Energy | <input type="checkbox"/> Nursing Homes | <input type="checkbox"/> Other |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Pari-Mutuel | |

Description:

Specific Legislation:

Section G - Sworn Statement

PLEASE NOTE: This activity report will be accepted **ONLY** when it bears an electronic signature of the registrant or responsible person in accordance with the Uniform Electronic Transactions Act and the procedures adopted by the Commission.

I understand the law requires lobbyists to obtain and preserve all documents necessary to substantiate their activity reports for four (4) years from the date of filing, and that lobbyists are required to make these materials available for inspection upon the request of the Indiana Lobby Registration Commission.

I swear, under penalties for perjury, that the answers and statements provided in this activity report were made by me and that these answers and statements are true and complete to the best of my knowledge and belief.

Name: Kimberly M. Reed **Title:** Secretary/Treasurer

Date: May 23, 2005